Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Complete if Known			
FEE TRANSMITTAL	Application Number	10/676,045		
Filing Date		9/30/2003	3	
For FY 2009	First Named Inventor	Yaron Ilan		
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name Zachary S Skelding		S Skelding	
	Art Unit 1644		· · · · · · · · · · · · · · · · · · ·	
TOTAL AMOUNT OF PAYMENT (\$) 1110.00	Attorney Docket	5795 - 09	90513 (ENZ-63(C	CIP))
METHOD OF PAYMENT (check all that apply)				
Check Credit Card Money Order None Other (please identify):				
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee				
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES	I may be subject to a su	ii chai ge.)		
FILING FEES SEARCH	FEES EXAMINA	TION FEES		
		mall Entity		
	<u>Fee (\$)</u>	Fee (\$)	Fees Pa	aid (\$)
	270 220	110		
Design 220 110 100	50 140	70	-	one discontinue di mandalame
	165 170	85	***************************************	
Reissue 330 165 540	270 650	325	***************************************	
Provisional 220 110 0	0 0	0		
2. EXCESS CLAIM FEES			T (0)	Small Entity
Fee Description Each claim over 20 (including Reissues) 52				<u>Fee (\$)</u> 26
Each independent claim over 3 (including Reissues) 220			110	
Multiple dependent claims			390	195
<u>Total Claims - 20 or HP Extra Claims Fee (</u>	Fee Paid (\$)			pendent Claims
x			Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.				
Indep. Claims - 3 or HP Extra Claims Fee			***************************************	
HP = highest number of independent claims paid for, if greater than 3.				
3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under				
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
	ach additional 50 or frac	ction thereof	Fee (\$)	Fee Paid (\$)
- 100 = /50 = (round up to a whole number) x =				
4. OTHER FEE(S)				Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)				
Other (e.g., late filing surcharge): Three-month Ext of Time \$1,110.00				
SUBMITTED BY				
Signature Kellie L. Caroler	Registration No.	52696	Telephone 41	2-471-8815
Name (Print/Type) Kellie L. Carden (Attorney/Agent) 52696 Telephone 412-4/1-8815				